

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Walker 4 NC

ADDRESS (number and street)
▼

PO Box 99247

Check if different
than previously
reported. (ACC)

Raleigh

NC

27624

2. FEC IDENTIFICATION NUMBER ▼

C

C00543231

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

NC

06

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

D D /

Y Y Y Y

2016

through

M M /

D D /

Y Y Y Y

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Collin McMichael

Signature of Treasurer

Collin McMichael

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

PAGE 2 / 109

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Walker 4 NC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
01		01		2016

To:

M M	/	D D	/	Y Y Y Y
03		31		2016

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	132783.42	549853.88
(b) Total Contribution Refunds (from Line 20(d))	500.00	700.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	132283.42	549153.88
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	97505.11	341549.07
(b) Total Offsets to Operating Expenditures (from Line 14).....	8463.73	16740.88
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	89041.38	324808.19
8. Cash on Hand at Close of Reporting Period (from Line 27).....	292702.23	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 109

Write or Type Committee Name

Walker 4 NC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	6

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

76110.00

289396.57

(ii) Unitemized.....

10898.00

24180.43

(iii) TOTAL of contributions from individuals ▶

87008.00

313577.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

45775.42

236276.88

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

132783.42

549853.88

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

8463.73

16740.88

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

141247.15

566594.76

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 109

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	97505.11	341549.07
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	200.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	500.00	500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	500.00	700.00
21. OTHER DISBURSEMENTS	136.25	7349.25
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	98141.36	349598.32

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	249596.44
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	141247.15
25. SUBTOTAL (add Line 23 and Line 24).....	390843.59
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	98141.36
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	292702.23

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: F3A
Transaction ID :

Schedule B includes all required memo entries for reimbursements. All additional reimbursements do not meet the \$200.00 per vendor aggregate threshold.

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 OF 109

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
June D Alexander

Mailing Address 19 Stonecreek Ct

City Greensboro State NC Zip Code 27455-2242

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2016

Transaction ID : SA11AI.12122

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Bruce Ashley

Mailing Address 807 Rollingwood Dr

City Greensboro State NC Zip Code 27410

FEC ID number of contributing federal political committee. **C**

Name of Employer Smith Moore Leatherwood LLP Occupation Attorney

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2016

Transaction ID : SA11AI.12126

Amount of Each Receipt this Period

1500.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
James A Barnwell Jr.

Mailing Address 2909 N. Fariway Drive

City Burlington State NC Zip Code 27215

FEC ID number of contributing federal political committee. **C**

Name of Employer Huffman Oil Company, Inc. Occupation President

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		22		2016

Transaction ID : SA11AI.12148

Amount of Each Receipt this Period

2000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

4500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Irving Al Bassett Jr
Mailing Address 5010 Bearberry Pointe

City Greensboro State NC Zip Code 27455

FEC ID number of contributing federal political committee.

C

Name of Employer
Strategic Management Services

Occupation
Attorney

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2016

Transaction ID : SA11Al.12029

Amount of Each Receipt this Period

250.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Ruth S Bevis
Mailing Address 8607 Rocky Ln

City Stokesdale State NC Zip Code 27357

FEC ID number of contributing federal political committee.

C

Name of Employer
Bryan Bevis

Occupation
Secretary

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 12 / 2016

Transaction ID : SA11Al.11854

Amount of Each Receipt this Period

250.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Ruth S Bevis
Mailing Address 8607 Rocky Ln

City Stokesdale State NC Zip Code 27357

FEC ID number of contributing federal political committee.

C

Name of Employer
Bryan Bevis

Occupation
Secretary

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date
350.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 25 / 2016

Transaction ID : SA11Al.12255

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
H Thomas Bobo

Mailing Address 2247 N Park Ave

City State Zip Code
Burlington NC 27217

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Fairystone Fabrics President

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date
1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 31 2016

Transaction ID : SA11AI.12419

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Richard M Boling

Mailing Address 202 Cedarwood Dr

City State Zip Code
Jamestown NC 27282-9405

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Lawndale Baptist Church Minister to Senior Adults

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date
300.00

Date of Receipt

M M / D D / Y Y Y Y
03 31 2016

Transaction ID : SA11AI.12437

Amount of Each Receipt this Period

100.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Peter T Booras

Mailing Address 7157 Bobby Jean Road

City State Zip Code
Julian NC 27283

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Freedom Beverage Company President

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date
2000.00

Date of Receipt

M M / D D / Y Y Y Y
03 31 2016

Transaction ID : SA11AI.12422

Amount of Each Receipt this Period

2000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3100.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Timothy J Britt

Mailing Address 2673 Fleming-Graham Road

City State Zip Code
Burlington NC 27217

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Alamance Sheriff's Department Deputy

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date
250.00

Date of Receipt

M M / D D / Y Y Y Y
03 31 2016

Transaction ID : SA11AI.12394

Amount of Each Receipt this Period

250.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Frances T Brown

Mailing Address 5803 Scotland Rd

City State Zip Code
Greensboro NC 27407

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
430.00

Date of Receipt

M M / D D / Y Y Y Y
02 18 2016

Transaction ID : SA11AI.11950

Amount of Each Receipt this Period

30.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Joseph Burns

Mailing Address 5 Lake Forest Court

City State Zip Code
Greensboro NC 27408

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Westchester Country Day School Instructor

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt

M M / D D / Y Y Y Y
02 09 2016

Transaction ID : SA11AI.11708

Amount of Each Receipt this Period

2700.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2980.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Robert B Chandler

Mailing Address 3240 Coventry PI

City Burlington	State NC	Zip Code 27215
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Chandler Concrete	Occupation Owner/Executive VP
---------------------------------------	----------------------------------

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date
500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2016

Transaction ID : SA11AI.12404

Amount of Each Receipt this Period

500.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Ted E Chandler

Mailing Address 5348 S. NC 62

City Burlington	State NC	Zip Code 27215
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date
500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2016

Transaction ID : SA11AI.12400

Amount of Each Receipt this Period

500.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Ted E Chandler

Mailing Address 5348 S. NC 62

City Burlington	State NC	Zip Code 27215
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date
2000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2016

Transaction ID : SA11AI.12402

Amount of Each Receipt this Period

1500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 109

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Thomas E Chandler Jr

Mailing Address 2516 Pineway Drive

City

Burlington

State

NC

Zip Code

27215

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chandler Concrete Company

Occupation

President/Founder

Receipt For: 2016

☐ Primary ☐ General☒ Other (specify) Special-Primary

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.12403

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Boyd Chatman

Mailing Address PO Box 1803

City

Burlington

State

NC

Zip Code

27216

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dotson Chatman Construction

Occupation

Owner

Receipt For: 2016

☐ Primary ☐ General☒ Other (specify) Special-Primary

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.12417

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Susan T Chumbley

Mailing Address 6072 Windsor Farme Rd

City

Summerfield

State

NC

Zip Code

27358

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☐ Primary ☐ General☒ Other (specify) Special-Primary

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		22		2016

Transaction ID : SA11AI.12203

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 109

(check only one)

☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Vickie W Clark

Mailing Address 1 Elm Ridge Lane

City

Greensboro

State

NC

Zip Code

27408

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2016

☐ Primary

☐ General

☒ Other (specify)

Special-Primary

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 22 / 2016

Transaction ID : SA11AI.12155

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Calvin O Cleveland

Mailing Address 6905 Wicklow Dr

City

Brown Summit

State

NC

Zip Code

27214

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mount Zion Baptist Church

Occupation

Preacher

Receipt For: 2016

☒ Primary

☐ General

☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 12 / 2016

Transaction ID : SA11AI.11856

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

James D Coble

Mailing Address PO Box 1154

City

Burlington

State

NC

Zip Code

27216

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Sales & Imports

Occupation

Owner

Receipt For: 2016

☐ Primary

☐ General

☒ Other (specify)

Special-Primary

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2016

Transaction ID : SA11AI.12430

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2250.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Haywood D Cochrane Jr.

Mailing Address 2016 Muirfield Court

City	State	Zip Code
Elon	NC	27244

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2016

Transaction ID : SA11AI.12267

Amount of Each Receipt this Period

500.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Tonya Cockman

Mailing Address 803 Hood Place

City	State	Zip Code
Greensboro	NC	27408

FEC ID number of contributing
federal political committee.

C

Name of Employer
Clear DefenceOccupation
CEO

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		22		2016

Transaction ID : SA11AI.12157

Amount of Each Receipt this Period

500.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Judith C Coleman

Mailing Address PO Box 4234

City	State	Zip Code
Burlington	NC	27215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Coleman RoofingOccupation
Secretary/Treasurer

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.12420

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

James R Copland III

Mailing Address 3025 Fairway Dr

City

Burlington

State

NC

Zip Code

27215

FEC ID number of contributing
federal political committee.

C

Name of Employer

Copland Fabrics

Occupation

CEO

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.12414

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Jason C Copland

Mailing Address 3156 Abingdon Place

City

Burlington

State

NC

Zip Code

27215

FEC ID number of contributing
federal political committee.

C

Name of Employer

Coplane Fabrics

Occupation

CEO

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		22		2016

Transaction ID : SA11AI.12174

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Judy J Copple

Mailing Address 639 Plainfield Rd

City

Greensboro

State

NC

Zip Code

27455-8235

FEC ID number of contributing
federal political committee.

C

Name of Employer

Westover Apartments, Inc.

Occupation

Secretary

Receipt For: 2016

☒ Primary☐ General☐ Other (specify)

Election Cycle-to-Date

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

Transaction ID : SA11AI.12065

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Kenneth F Corbett

Mailing Address **PO Box 946**

City **Burlington** State **NC** Zip Code **27216**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) **Special-Primary**

Election Cycle-to-Date
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.12409

Amount of Each Receipt this Period

500.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Terry D Crenshaw

Mailing Address **PO Box 910**

City **Burlington** State **NC** Zip Code **27216**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Carolina Nissan** Occupation **Owner**

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) **Special-Primary**

Election Cycle-to-Date
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.12413

Amount of Each Receipt this Period

2000.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
David J Delman

Mailing Address **4301 Westmount Drive**

City **Greensboro** State **NC** Zip Code **27410**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Delman and Company, CPAs** Occupation **Accounting**

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		25		2016

Transaction ID : SA11AI.11697

Amount of Each Receipt this Period

600.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3100.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Van T Duncan

Mailing Address 403 Cross Vine Ln

City Greensboro State NC Zip Code 27455

FEC ID number of contributing federal political committee. **C**

Name of Employer Burlington Aviation Occupation Flight Instructor

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2016

Transaction ID : SA11AI.11886

Amount of Each Receipt this Period

100.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
J Brad Edwards

Mailing Address 403 Lloyds Ln

City Alexandria State VA Zip Code 22302

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Federal Affairs

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2016

Transaction ID : SA11AI.11979

Amount of Each Receipt this Period

500.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Tina Forsberg

Mailing Address 2 Hillwind Ct

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2016

Transaction ID : SA11AI.11706

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

625.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Tina Forsberg

Mailing Address **2 Hillwind Ct**

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		01		2016

Transaction ID : SA11AI.12371

Amount of Each Receipt this Period

25.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Tina Forsberg

Mailing Address **2 Hillwind Ct**

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date
555.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		22		2016

Transaction ID : SA11AI.12189

Amount of Each Receipt this Period

30.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Tina Forsberg

Mailing Address **2 Hillwind Ct**

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date
580.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		29		2016

Transaction ID : SA11AI.12278

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

80.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Gail E Gassen

Mailing Address 1575 John Knox Drive
Apt 104D

City State Zip Code
Colfax NC 27235

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date
500.00

Date of Receipt

M M	D D	Y Y Y Y
03	22	2016

Transaction ID : SA11AI.12152

Amount of Each Receipt this Period

500.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Joseph Giaritelli

Mailing Address 124 Beverly Pl

City State Zip Code
Greensboro NC 27403

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Lawndale Baptist Church Senior Pastor

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date
550.00

Date of Receipt

M M	D D	Y Y Y Y
03	22	2016

Transaction ID : SA11AI.12200

Amount of Each Receipt this Period

30.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Diane Goldstein

Mailing Address 5001 Bearberry Point

City State Zip Code
Greensboro NC 27455

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Temple Emanuel Officer

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

M M	D D	Y Y Y Y
01	25	2016

Transaction ID : SA11AI.11683

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1030.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Marilyn Green

Mailing Address 44 Kemp Road

E

City

Greensboro

State

NC

Zip Code

27410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2016

Transaction ID : SA11AI.11932

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

James Groce

Mailing Address 806 Northern Shores Lane

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Campbell Univ. College of Phar

Occupation

Professor of Pharmacy

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		20		2016

Transaction ID : SA11AI.12213

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Barbara Guest

Mailing Address 101 Manchester Place

City

Greensboro

State

NC

Zip Code

27410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2016

Transaction ID : SA11AI.11922

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

330.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial)

Barbara Guest

Mailing Address 101 Manchester Place

City

Greensboro

State

NC

Zip Code

27410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Special-Primary

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.12445

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Lee Guthrie

Mailing Address 7 Orchard Grass Ct

City

Greensboro

State

NC

Zip Code

27410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Guilford County Sheriff's Offi

Occupation

Deputy Sheriff

Receipt For: 2016

☒

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		25		2016

Transaction ID : SA11AI.11693

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Lee Guthrie

Mailing Address 7 Orchard Grass Ct

City

Greensboro

State

NC

Zip Code

27410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Guilford County Sheriff's Offi

Occupation

Deputy Sheriff

Receipt For: 2016

☒

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2016

Transaction ID : SA11AI.11709

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

450.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Lynn M Guthrie

Mailing Address 7 Orchard Grass Ct

City

Greensboro

State

NC

Zip Code

27410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Special-Primary

Election Cycle-to-Date

370.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		17		2016

Transaction ID : SA11AI.12233

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Robert A Gutman

Mailing Address 310 Watts Street

City

Durham

State

NC

Zip Code

27701

FEC ID number of contributing
federal political committee.

C

Name of Employer

Durham Nephrology

Occupation

Physiican

Receipt For: 2016

☒

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2016

Transaction ID : SA11AI.11865

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Roger Hair

Mailing Address 187 Deertract Loop

City

Stoneville

State

NC

Zip Code

27048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Thomas Goal Post Company

Occupation

Administrative

Receipt For: 2016

☒

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2016

Transaction ID : SA11AI.11707

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

650.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Walker 4 NCFull Name (Last, First, Middle Initial)
A. Roger Hair

Mailing Address 187 Deertract Loop

City	State	Zip Code
Stoneville	NC	27048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Thomas Goal Post CompanyOccupation
Administrative

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		17		2016

Transaction ID : SA11AI.12232

Amount of Each Receipt this Period

50.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
B. Bryan Hall

Mailing Address 21 Old Saybrook Drive

City	State	Zip Code
Greensboro	NC	27455

FEC ID number of contributing
federal political committee.

C

Name of Employer
Graphic Visual SolutionsOccupation
President and CEO

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		20		2016

Transaction ID : SA11AI.12214

Amount of Each Receipt this Period

1500.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
C. Steve H Hall

Mailing Address 5705 Fox Hound Drive

City	State	Zip Code
Oak Ridge	NC	27310

FEC ID number of contributing
federal political committee.

C

Name of Employer
MDSiOccupation
EVP Business Development

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		13		2016

Transaction ID : SA11AI.11674

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2550.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Pamela Foster Hanzaker

Mailing Address 5016 Casting Way

City Greensboro State NC Zip Code 27455

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation Psychologist

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date 674.00

Date of Receipt

M M / D D / Y Y Y Y
02 22 2016

Transaction ID : SA11AI.11966

Amount of Each Receipt this Period

30.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Judy Haran

Mailing Address 4312 Hwy 150 E

City Browns Summit State NC Zip Code 27214

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 07 2016

Transaction ID : SA11AI.12071

Amount of Each Receipt this Period

50.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Gary E Harris

Mailing Address 2546 Barber Road

City Elon State NC Zip Code 27244

FEC ID number of contributing federal political committee. C

Name of Employer Unichem Occupation President

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date 400.00

Date of Receipt

M M / D D / Y Y Y Y
03 22 2016

Transaction ID : SA11AI.12142

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

280.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Nat T Harris

Mailing Address 7241 Burlington Road

City

Whitsett

State

NC

Zip Code

27377

FEC ID number of contributing
federal political committee.

C

Name of Employer

Harris, Crouch, Long, Scott &

Occupation

Insurance

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		22		2016

Transaction ID : SA11AI.12140

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Jennifer N Higgins

Mailing Address 305 S. Payne Street

Apt 306

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chamberhill Strategies

Occupation

Partner

Receipt For: 2016

☒ Primary☐ General☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2016

Transaction ID : SA11AI.11931

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Fay Bowman Hoggard

Mailing Address 3307 Waldron Drive

City

Greensboro

State

NC

Zip Code

27408

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Property Manager

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

940.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2016

Transaction ID : SA11AI.12127

Amount of Each Receipt this Period

340.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1840.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Ralph M Holt Jr.

Mailing Address PO Box 819

City Burlington State NC Zip Code 27216

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2016

Transaction ID : SA11AI.12415

Amount of Each Receipt this Period

250.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Samuel Hooker

Mailing Address 1229 Hall Road

City Westfield State NC Zip Code 27053

FEC ID number of contributing federal political committee. C

Name of Employer Ridge Cone Occupation Executive

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date 1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 18 / 2016

Transaction ID : SA11AI.12060

Amount of Each Receipt this Period

1000.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Flavius D Hornaday III

Mailing Address 7162 Coble Mill Road

City Snow Camp State NC Zip Code 27349

FEC ID number of contributing federal political committee. C

Name of Employer Knit Wear Fabrics Occupation Textiles

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date 2000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2016

Transaction ID : SA11AI.12432

Amount of Each Receipt this Period

2000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Walker 4 NCFull Name (Last, First, Middle Initial)
A. Nancy Howard

Mailing Address 1520 Burnetts Chapel Road

City	State	Zip Code
Greensboro	NC	27407

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2016

Transaction ID : SA11AI.11935

Amount of Each Receipt this Period

60.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
B. Cheryl L Kingman

Mailing Address 223 Oakmont Dr

City	State	Zip Code
Advance	NC	27006

FEC ID number of contributing
federal political committee.

C

Name of Employer
HomemakerOccupation
Homemaker

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2016

Transaction ID : SA11AI.11930

Amount of Each Receipt this Period

30.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
C. Cheryl L Kingman

Mailing Address 223 Oakmont Dr

City	State	Zip Code
Advance	NC	27006

FEC ID number of contributing
federal political committee.

C

Name of Employer
HomemakerOccupation
Homemaker

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3730.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

Transaction ID : SA11AI.12067

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

590.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

James F Kirkpatrick Jr

Mailing Address 124 NC Hwy 150 W

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Merrill Lynch

Occupation

Financial Advisor

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2016

Transaction ID : SA11Al.11968

Amount of Each Receipt this Period

1250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Jane E Kirkpatrick

Mailing Address 124 NC Hwy 150 W

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2016

Transaction ID : SA11Al.11969

Amount of Each Receipt this Period

1250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Lisa F Kirkpatrick

Mailing Address 2040 Engleman Court

City

Burlington

State

NC

Zip Code

27215

FEC ID number of contributing
federal political committee.

C

Name of Employer

LFK Properties, Inc.

Occupation

Owner/Broker

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2016

Transaction ID : SA11Al.12265

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Bradford Koury

Mailing Address PO Box 850

City	State	Zip Code
Burlington	NC	27216

FEC ID number of contributing
federal political committee.

C

Name of Employer
Carolina HosiereyOccupation
Executive

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

4700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.12438

Amount of Each Receipt this Period

2000.00

☐ Memo Item**B. Ernest Koury**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 850

City	State	Zip Code
Burlington	NC	27215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Alamance Executive ParkOccupation
Executive

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.12412

Amount of Each Receipt this Period

2000.00

☐ Memo Item**C. Teresa D Lewis**

Full Name (Last, First, Middle Initial)

Mailing Address 538 Monclaire Dr

City	State	Zip Code
Mount Airy	NC	27030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Workforce CarolinaOccupation
President

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		18		2016

Transaction ID : SA11AI.12037

Amount of Each Receipt this Period

200.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

4200.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Teresa D Lewis

Mailing Address 538 Monclaire Dr

City

Mount Airy

State

NC

Zip Code

27030

FEC ID number of contributing
federal political committee.

C

Name of Employer

Workforce Carolina

Occupation

President

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Special-Primary

Election Cycle-to-Date

1300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		22		2016

Transaction ID : SA11AI.12202

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mark A Lyerly

Mailing Address 6311 Linda Dr

City

Lewisville

State

NC

Zip Code

27023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Neurosurgical Solutions, PA

Occupation

Neurosurgeon

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Special-Primary

Election Cycle-to-Date

2025.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		27		2016

Transaction ID : SA11AI.12279

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mark A Lyerly

Mailing Address 6311 Linda Dr

City

Lewisville

State

NC

Zip Code

27023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Neurosurgical Solutions, PA

Occupation

Neurosurgeon

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Special-Primary

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		27		2016

Transaction ID : SA11AI.12280

Amount of Each Receipt this Period

475.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Susan M Macheldt

Mailing Address 10 Hines Park Lane

City

Greensboro

State

NC

Zip Code

27455-9338

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cisco

Occupation

Business Development Mgr

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

Transaction ID : SA11AI.12021

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Richard Magee

Mailing Address 3003 Steepleton Colony Court

City

Greensboro

State

NC

Zip Code

27410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Faith Construction

Occupation

Contractor

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2016

Transaction ID : SA11AI.12118

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Janice Maness

Mailing Address 7375 Doggett Rd

City

Browns Summit

State

NC

Zip Code

27214

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1406.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		13		2016

Transaction ID : SA11AI.11673

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1100.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Janice Maness

Mailing Address 7375 Doggett Rd

City State Zip Code
Browns Summit NC 27214

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1506.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2016

Transaction ID : SA11AI.11867

Amount of Each Receipt this Period

100.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Janice Maness

Mailing Address 7375 Doggett Rd

City State Zip Code
Browns Summit NC 27214

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1626.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2016

Transaction ID : SA11AI.11970

Amount of Each Receipt this Period

120.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Janice Maness

Mailing Address 7375 Doggett Rd

City State Zip Code
Browns Summit NC 27214

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date
1826.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		22		2016

Transaction ID : SA11AI.12160

Amount of Each Receipt this Period

200.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

420.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Walker 4 NC**A.** Full Name (Last, First, Middle Initial)
Janice Maness

Mailing Address 7375 Doggett Rd

City	State	Zip Code
Browns Summit	NC	27214

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

1926.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2016

Transaction ID : SA11AI.12264

Amount of Each Receipt this Period

100.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)
Patricia J Marsh

Mailing Address 214 Kirk Rd

City	State	Zip Code
Greensboro	NC	27455-1717

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		08		2016

Transaction ID : SA11AI.12084

Amount of Each Receipt this Period

250.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)
Robert A. J. McGrady

Mailing Address 100 Pineburr Rd

City	State	Zip Code
Greensboro	NC	27455-1700

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		25		2016

Transaction ID : SA11AI.11678

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

450.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Robert A. J. McGrady

A.

Mailing Address 100 Pineburr Rd

City

Greensboro

State

NC

Zip Code

27455-1700

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2016

Transaction ID : SA11AI.11869

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Bruce F McGuirk

B.

Mailing Address 6002 Armfield Ct

City

Summerfield

State

NC

Zip Code

27358

FEC ID number of contributing
federal political committee.

C

Name of Employer

John Hancock Brokerage

Occupation

Regional Director

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2016

Transaction ID : SA11AI.11884

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Virginia W Milam

C.

Mailing Address 5920 Khaki Raod

City

Summerfield

State

NC

Zip Code

27358

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Real Estate Broker

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2016

Transaction ID : SA11AI.12115

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1450.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Kenneth J Miller

Mailing Address 100 Kemp Rd W

City Greensboro State NC Zip Code 27410-6039

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Insurance

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		25		2016

Transaction ID : SA11AI.11688

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Ronald Milstein

Mailing Address 10 Loch Ridge Ct

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee. **C**

Name of Employer Lorillard Inc Occupation Executive

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		25		2016

Transaction ID : SA11AI.11682

Amount of Each Receipt this Period

1000.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Betty H Nichols

Mailing Address 4 Elm Grove Ct

City Greensboro State NC Zip Code 27405

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1880.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2016

Transaction ID : SA11AI.11957

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2030.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Perry Nichols

Mailing Address 509 Truitt Avenue

City

Elon

State

NC

Zip Code

27244

FEC ID number of contributing
federal political committee.

C

Name of Employer
Nichols Chrysler DodgeOccupation
Owner

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		22		2016

Transaction ID : SA11AI.12129

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Steven R Norris

Mailing Address 1201 Country Club Dr

City

Greensboro

State

NC

Zip Code

27408

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-EmployedOccupation
Physician

Receipt For: 2016

☒ Primary☐ General☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2016

Transaction ID : SA11AI.11713

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Steven R Norris

Mailing Address 1201 Country Club Dr

City

Greensboro

State

NC

Zip Code

27408

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-EmployedOccupation
Physician

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		17		2016

Transaction ID : SA11AI.12230

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2750.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Walker 4 NC**A.** Full Name (Last, First, Middle Initial)
Carl G Oehmig IV

Mailing Address 1819 Dalton Road

City	State	Zip Code
Greensboro	NC	27408

FEC ID number of contributing
federal political committee.

C

Name of Employer
Glen Raven, Inc.Occupation
President

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.12398

Amount of Each Receipt this Period

500.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)
Frances M Olmsted

Mailing Address 5125 Bunch Road

City	State	Zip Code
Summerfield	NC	27358

FEC ID number of contributing
federal political committee.

C

Name of Employer
HomemakerOccupation
Homemaker

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2016

Transaction ID : SA11AI.11963

Amount of Each Receipt this Period

500.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)
Robin J Parker

Mailing Address 5908 Founders Dr

City	State	Zip Code
Greensboro	NC	27410

FEC ID number of contributing
federal political committee.

C

Name of Employer
Apple, Koceja & Assoc., CPAsOccupation
Accountant

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1060.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2016

Transaction ID : SA11AI.11972

Amount of Each Receipt this Period

60.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1060.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Robin J Parker

Mailing Address 5908 Founders Dr

City Greensboro State NC Zip Code 27410

FEC ID number of contributing federal political committee.

Name of Employer Apple, Koceja & Assoc., CPAs Occupation Accountant

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y
03 / 22 / 2016

Transaction ID : SA11AI.12186

Amount of Each Receipt this Period

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Benjamin Parnell

Mailing Address 220 Woodlyn Dr

City Reidsville State NC Zip Code 27320

FEC ID number of contributing federal political committee.

Name of Employer Retired Occupation Retired

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y
01 / 25 / 2016

Transaction ID : SA11AI.11679

Amount of Each Receipt this Period

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Bernie Parnell

Mailing Address 220 Woodlyn Dr

City Reidsville State NC Zip Code 27320

FEC ID number of contributing federal political committee.

Name of Employer Retired Occupation Retired

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y
03 / 22 / 2016

Transaction ID : SA11AI.12154

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Larry W Pearman

Mailing Address 4810 Carlson Valley Rd

City	State	Zip Code
Summerfield	NC	27358

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-EmployedOccupation
Attorney

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

4700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		18		2016

Transaction ID : SA11AI.12059

Amount of Each Receipt this Period

2000.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Glenn H Person Jr

Mailing Address 5876 Stanley Huff Road

City	State	Zip Code
Summerfield	NC	27358

FEC ID number of contributing
federal political committee.

C

Name of Employer
Raymond JamesOccupation
Stock Broker

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		08		2016

Transaction ID : SA11AI.12080

Amount of Each Receipt this Period

500.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Elizabeth Phillips

Mailing Address 908 Country Club Drive

City	State	Zip Code
Greensboro	NC	27408

FEC ID number of contributing
federal political committee.

C

Name of Employer
Phillips FoundationOccupation
Executive Director

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2016

Transaction ID : SA11AI.11857

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Clint Porterfield

Mailing Address 3093 Victoria Falls Drive

City

Burlington

State

NC

Zip Code

27215

FEC ID number of contributing
federal political committee.

C

Name of Employer
WOW Services, LLC

Occupation

Business Owner

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2016

Transaction ID : SA11AI.12249

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. James B Powell

Mailing Address 1573 York Place

City

Burlington

State

NC

Zip Code

27215

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.12407

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Samuel Powell

Mailing Address PO Box 2104

City

Burlington

State

NC

Zip Code

27216

FEC ID number of contributing
federal political committee.

C

Name of Employer

Powell Enterprises

Occupation

Executive

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

2250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2016

Transaction ID : SA11AI.12257

Amount of Each Receipt this Period

2000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3300.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Ronald E. Price

Mailing Address 218 Cedar Run

City

Reidsville

State

NC

Zip Code

27320

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		08		2016

Transaction ID : SA11AI.12078

Amount of Each Receipt this Period

160.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Richard Ramos

Mailing Address 7501 Green Ash Court

City

Summerfield

State

NC

Zip Code

27358

FEC ID number of contributing federal political committee.

C

Name of Employer

Greensboro Orthopaedics

Occupation

Physician

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

Transaction ID : SA11AI.12073

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Deborah H Ratliff

Mailing Address 90 Heron's Bill Dr

City

Bluffton

State

SC

Zip Code

29909

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		18		2016

Transaction ID : SA11AI.12222

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1410.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Fairfax Reynolds

Mailing Address 3008 Forestdale Drive

City State Zip Code
Burlington NC 27215

FEC ID number of contributing
federal political committee.

C

Name of Employer
VantageSouth Bank

Occupation
Bank Management

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
03 31 2016

Transaction ID : SA11AI.12405

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. John W Robinson

Mailing Address 3704 Windspray Ct

City State Zip Code
Summerfield NC 27358

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

850.00

Date of Receipt

M M / D D / Y Y Y Y
03 22 2016

Transaction ID : SA11AI.12136

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Keith S Rosen

Mailing Address 117 Manchester Place

City State Zip Code
Greensboro NC 27410

FEC ID number of contributing
federal political committee.

C

Name of Employer
Atlantic Scrap & Processing

Occupation
Vice President

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
01 25 2016

Transaction ID : SA11AI.11685

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1300.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

William G Rosenberg

A.

Mailing Address 508 Queensferry Road

City

Cary

State

NC

Zip Code

27511

FEC ID number of contributing
federal political committee.

C

Name of Employer

E3 Ventures.com

Occupation

President

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		25		2016

Transaction ID : SA11AI.11689

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Dr. Michael Ross

B.

Mailing Address 2901 Fairview Road

City

Raleigh

State

NC

Zip Code

27608

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wake Radiology

Occupation

Physician

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		25		2016

Transaction ID : SA11AI.11691

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Ann Sapp

C.

Mailing Address 1216 Briarcliff Road

City

Greensboro

State

NC

Zip Code

27408

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2016

Transaction ID : SA11AI.11938

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

David M Scott

A.

Mailing Address 1777 Foxhall Lane

City

Mebane

State

NC

Zip Code

27302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sales Professional

Occupation

Scott Sales, LLC

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

1850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2016

Transaction ID : SA11AI.12262

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

George Ed Sears

B.

Mailing Address 2701 Winslow Ln

City

Winston Salem

State

NC

Zip Code

27103-5736

FEC ID number of contributing
federal political committee.

C

Name of Employer

Grace Baptist Temple

Occupation

Minister

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

910.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		22		2016

Transaction ID : SA11AI.12159

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Jonathan D Shepherd

C.

Mailing Address 8107 Rogers Ct

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

AT&T

Occupation

Director

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		17		2016

Transaction ID : SA11AI.12236

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Barry Smith

Mailing Address 903 McDowell Drive

City

Greensboro

State

NC

Zip Code

27408

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Sales

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.12416

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Elizabeth B Smith

Mailing Address 7222 Northmoor Trce

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2016

☒ Primary☐ General☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2016

Transaction ID : SA11AI.11954

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Micah Spencer

Mailing Address 6315 Nesting Way

City

Oak Ridge

State

NC

Zip Code

27310

FEC ID number of contributing
federal political committee.

C

Name of Employer

Student

Occupation

Student

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		19		2016

Transaction ID : SA11AI.12216

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

525.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Dale A Stearns

Mailing Address 711 N Gurney St

City

Burlington

State

NC

Zip Code

27215

FEC ID number of contributing
federal political committee.

C

Name of Employer

CA Stearns & Co

Occupation

Ford Franchise

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		22		2016

Transaction ID : SA11AI.12131

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Leigh Fitchett Sudbrink

Mailing Address 402 Monmouth Dr

City

Greensboro

State

NC

Zip Code

27410-6051

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		22		2016

Transaction ID : SA11AI.12158

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Brent Tilley

Mailing Address 323 Nurse Road

City

Ararat

State

NC

Zip Code

27007

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary☐ General☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2016

Transaction ID : SA11AI.12117

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

650.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Milton Transou

Mailing Address 1002 Lamp Post Lane

City

Greensboro

State

NC

Zip Code

27410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2016

Transaction ID : SA11AI.11920

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Raymond Ted Vanhoy III

Mailing Address 5698 Green Dale Ct

City

Summerfield

State

NC

Zip Code

27358

FEC ID number of contributing
federal political committee.

C

Name of Employer

RF Micro Devices

Occupation

Engineer

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

3850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		19		2016

Transaction ID : SA11AI.12217

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Jerry W Walker

Mailing Address 8308 McCrory Rd

City

Stokesdale

State

NC

Zip Code

27357

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oak Level Baptist Church

Occupation

Pastor

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		25		2016

Transaction ID : SA11AI.11680

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

850.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Walker 4 NCFull Name (Last, First, Middle Initial)
A. Donald Wendelken

Mailing Address 3406 Windswept Dr

City	State	Zip Code
Summerfield	NC	27358

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-EmployedOccupation
Manager

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

Transaction ID : SA11AI.12074

Amount of Each Receipt this Period

700.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
B. Donald Wendelken

Mailing Address 3406 Windswept Dr

City	State	Zip Code
Summerfield	NC	27358

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-EmployedOccupation
Manager

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

Transaction ID : SA11AI.12179

Amount of Each Receipt this Period

1300.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
C. Lane B West

Mailing Address 26 Kinglet Cir

City	State	Zip Code
Greensboro	NC	27455-1362

FEC ID number of contributing
federal political committee.

C

Name of Employer
BB&TOccupation
Financial Consulting

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2016

Transaction ID : SA11AI.11711

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2250.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Lane B West

Mailing Address 26 Kinglet Cir

City Greensboro State NC Zip Code 27455-1362

FEC ID number of contributing federal political committee. **C**

Name of Employer BB&T Occupation Financial Consulting

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		16		2016

Transaction ID : SA11AI.12242

Amount of Each Receipt this Period

50.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
David Westcott

Mailing Address PO Box 1598

City Burlington State NC Zip Code 27216

FEC ID number of contributing federal political committee. **C**

Name of Employer David Westcott Auto Occupation Owner

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		17		2016

Transaction ID : SA11AI.12030

Amount of Each Receipt this Period

1000.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Lane R Williamson

Mailing Address 201 Chapel Hill Road

City Burlington State NC Zip Code 27215

FEC ID number of contributing federal political committee. **C**

Name of Employer Hickory Farms Occupation Manager

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.12426

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2050.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Tom E Williamson Jr.

Mailing Address 201 Chapel Hill Roa

City State Zip Code
Burlington NC 27215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hickory Farms Franchise

Occupation
Owner

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
03 31 2016

Transaction ID : SA11AI.12424

Amount of Each Receipt this Period

2000.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Jack W Worsham

Mailing Address 1808 Worsham Pl

City State Zip Code
Greensboro NC 27408-3114

FEC ID number of contributing
federal political committee.

C

Name of Employer
Intertech Corp

Occupation
Sales Executive

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
03 28 2016

Transaction ID : SA11AI.12260

Amount of Each Receipt this Period

500.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Steven A Wright

Mailing Address 128 Peppertree Dr

City State Zip Code
Mebane NC 27302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
03 29 2016

Transaction ID : SA11AI.12277

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2750.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Walker 4 NCFull Name (Last, First, Middle Initial)
A. Dr Samuel H Zimmern

Mailing Address 3601 Knapdale Lane

City	State	Zip Code
Charlotte	NC	28226

FEC ID number of contributing
federal political committee.

C

Name of Employer
Carolinas Healthcare SystemOccupation
Physician

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		25		2016

Transaction ID : SA11Al.11695

Amount of Each Receipt this Period

500.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
B.

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

☐ Memo ItemFull Name (Last, First, Middle Initial)
C.

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

500.00

76110.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1120 CONNECTICUT AVENUE NW

SUITE 600

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

C

C00004275

Name of Employer

Occupation

Receipt For: 2016

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

6000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11C.12393

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1120 CONNECTICUT AVENUE NW

SUITE 600

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

C

C00004275

Name of Employer

Occupation

Receipt For: 2016

☐ Primary
☒ Other (specify)
☐ General

Special-Primary

Election Cycle-to-Date

6500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11C.12454

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN OPTOMETRIC ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1505 PRINCE STREET

SUITE 300

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.

C

C00024968

Name of Employer

Occupation

Receipt For: 2016

☐ Primary
☒ Other (specify)
☐ General

Special-Primary

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11C.12294

Amount of Each Receipt this Period

1500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

3500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial)
ASSOCIATED BUILDERS AND CONTRACTORS POLITICAL ACTION COMMITTEE (ABC PAC)

A.

Mailing Address 440 FIRST STREET NW
SUITE 200

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing
federal political committee.

C C00010421

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y
03 31 2016

Transaction ID : SA11C.12290

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)
AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)

B.

Mailing Address 208 S. AKARD STREET
SUITE 2701

City State Zip Code
DALLAS TX 75202

FEC ID number of contributing
federal political committee.

C C00109017

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

10000.00

Date of Receipt

M M / D D / Y Y Y Y
03 22 2016

Transaction ID : SA11C.12209

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)
BYRNE FOR CONGRESS

C.

Mailing Address PO BOX 2743

City State Zip Code
MOBILE AL 36652

FEC ID number of contributing
federal political committee.

C C00545673

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 31 2016

Transaction ID : SA11C.12455

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

8500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

CATHY MCMORRIS RODGERS FOR CONGRESS

A.

Mailing Address BOX 137

City

SPOKANE

State

WA

Zip Code

99210

FEC ID number of contributing
federal political committee.

C C00390476

Name of Employer

Occupation

Receipt For: 2016

☐ Primary☐ General☒ Other (specify) Special-Primary

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2016

Transaction ID : SA11C.12281

Amount of Each Receipt this Period

175.42

☐ Memo Item

In-kind - Fundraising Consulting

Full Name (Last, First, Middle Initial)

CMR POLITICAL ACTION COMMITTEE

B.

Mailing Address PO BOX 2485

City

SPRINGFIELD

State

VA

Zip Code

22152

FEC ID number of contributing
federal political committee.

C C00469429

Name of Employer

Occupation

Receipt For: 2016

☐ Primary☐ General☒ Other (specify) Special-Primary

Election Cycle-to-Date

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2016

Transaction ID : SA11C.12293

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL

C.

Mailing Address 1701 JFK BLVD, 49TH FLOOR

City

PHILADELPHIA

State

PA

Zip Code

19103

FEC ID number of contributing
federal political committee.

C C00248716

Name of Employer

Occupation

Receipt For: 2016

☒ Primary☐ General☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : SA11C.12112

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

5675.42

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL

A.

Mailing Address 1701 JFK BLVD, 49TH FLOOR

City

PHILADELPHIA

State

PA

Zip Code

19103

FEC ID number of contributing
federal political committee.

C C00248716

Name of Employer

Occupation

Receipt For: 2016

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		10		2016

Transaction ID : SA11C.12114

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

EXCELSIOR PAC

B.

Mailing Address 2470 DANIELLS BR RD STE 121

City

ATHENS

State

GA

Zip Code

30606

FEC ID number of contributing
federal political committee.

C C00541078

Name of Employer

Occupation

Receipt For: 2016

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2016

Transaction ID : SA11C.11981

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GARY PALMER FOR CONGRESS

C.

Mailing Address 1919 OXMOOR RD #235

City

HOMEWOOD

State

AL

Zip Code

35209

FEC ID number of contributing
federal political committee.

C C00551374

Name of Employer

Occupation

Receipt For: 2016

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2016

Transaction ID : SA11C.12020

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE (INSURP)

A.

Mailing Address 20 F STREET, NW SUITE 610

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.

C C00022343

Name of Employer

Occupation

Receipt For: 2016

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

7000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11C.12289

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

KELLEY DRYE & WARREN POLITICAL ACTION COMMITTEE

Mailing Address 3050 K STREET NW SUITE 400

City

Washington

State

DC

Zip Code

20007

FEC ID number of contributing
federal political committee.

C C00301929

Name of Employer

Occupation

Receipt For: 2016

☐ Primary
☒ Other (specify)
☐ General

Special-Primary

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11C.12452

Amount of Each Receipt this Period

1000.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

LABORATORY CORPORATION OF AMERICA HOLDINGS POLITICAL PARTICIPATION COMMITTEE

Mailing Address 231 MAPLE AVENUE

City

BURLINGTON

State

NC

Zip Code

27215

FEC ID number of contributing
federal political committee.

C C00314997

Name of Employer

Occupation

Receipt For: 2016

☐ Primary
☒ Other (specify)
☐ General

Special-Primary

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11C.12291

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

3000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 56 OF 109

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

LEE PAC

Mailing Address 47 FLINTLOCK DRIVE

City

SHIRLEY

State

NY

Zip Code

11967

FEC ID number of contributing
federal political committee.

C C00573626

Name of Employer

Occupation

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 25 / 2016

Transaction ID : SA11C.12251

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

Mailing Address 430 NORTH MICHIGAN AVENUE

City

CHICAGO

State

IL

Zip Code

60611

FEC ID number of contributing
federal political committee.

C C00030718

Name of Employer

Occupation

Receipt For: 2016

☒ Primary☐ General☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 12 / 2016

Transaction ID : SA11C.11838

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL AUTOMOBILE DEALERS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 8400 WESTPARK DRIVE

City

Tyson's

State

VA

Zip Code

22102

FEC ID number of contributing
federal political committee.

C C00040998

Name of Employer

Occupation

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2016

Transaction ID : SA11C.12457

Amount of Each Receipt this Period

2500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

4500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 57 OF 109

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

A.

Mailing Address 1101 KING STREET

SUITE 600

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.

C C00144766

Name of Employer

Occupation

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		22		2016

Transaction ID : SA11C.12205

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL COMMUNITY PHARMACISTS ASSOCIATION - PAC

B.

Mailing Address 100 DAINGERFIELD ROAD

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.

C C00030809

Name of Employer

Occupation

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

3500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : SA11C.12292

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

C.

Mailing Address 469 HOSPITAL DR.

SUITE C

City

GASTONIA

State

NC

Zip Code

28054

FEC ID number of contributing
federal political committee.

C C00405555

Name of Employer

Occupation

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Special-Primary

Election Cycle-to-Date

4500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : SA11C.12284

Amount of Each Receipt this Period

2500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

6000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 58 OF 109

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

NATIONAL PORK PRODUCERS COUNCIL PORK PAC

A.

Mailing Address P.O. BOX 10383

City

DES MOINES

State

IA

Zip Code

50306

FEC ID number of contributing
federal political committee.

C C00201871

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		10		2016

Transaction ID : SA11C.12113

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PUBLIX SUPER MARKETS, INC. ASSOCIATES POLITICAL ACTION COMMITTEE

B.

Mailing Address PO BOX 407

City

LAKELAND

State

FL

Zip Code

33811

FEC ID number of contributing
federal political committee.

C C00400705

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

Transaction ID : SA11C.12076

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RICHARD W. GUNN JR FOR NC SENATE

C.

Mailing Address PO BOX 1440

City

BURLINGTON

State

NC

Zip Code

27216

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		29		2016

Transaction ID : SA11C.12007

Amount of Each Receipt this Period

100.00

☐ Memo Item

Permissible Funds

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3600.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 59 OF 109

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY FEDERAL POLITICAL ACTION COMMITTEE

A.

Mailing Address ONE STATE FARM PLAZA

C/O MARK SCHWAMBERGER, TREASURER.

City	State	Zip Code
BLOOMINGTON	IL	61710

FEC ID number of contributing federal political committee.

C C00544817

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : SA11C.12459

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

TE CONNECTIVITY, INC. POLITICAL ACTION COMMITTEE Telpac

Mailing Address 607 14TH STREET NW

STE. 250

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing federal political committee.

C C00433482

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : SA11C.12288

Amount of Each Receipt this Period

1000.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

THE GOODYEAR TIRE & RUBBER COMPANY GOOD GOVERNMENT FUND (GOODYEAR GOOD GOVERNMENT FUND)

Mailing Address 200 INNOVATION WAY

City	State	Zip Code
AKRON	OH	44316

FEC ID number of contributing federal political committee.

C C00100131

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		22		2016

Transaction ID : SA11C.12207

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 60 OF 109

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Walker 4 NC

Full Name (Last, First, Middle Initial)
 TITLE APPRAISAL VENDOR MANAGEMENT ASSOCIATION POLITICAL ACTION COMMITTEE (TAVMA-PAC)

A.

Mailing Address 600 CLUBHOUSE DRIVE SUITE 200

City	State	Zip Code
MOON TOWNSHIP	PA	15108

FEC ID number of contributing
federal political committee.

C C00372094

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Special-Primary

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 03 / 29 / 2016

Transaction ID : SA11C.12274

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)
TRIAD GOOD GOVERNMENT PAC

Mailing Address PO BOX 2888

City	State	Zip Code
GREENSBORO	NC	27402

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
 01 / 25 / 2016

Transaction ID : SA11C.11700

Amount of Each Receipt this Period

500.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)
U.S. TRAVEL ASSOCIATION PAC

Mailing Address 1100 NEW YORK AVENUE
 SUITE 450W

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing
federal political committee.

C C00457754

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y
 02 / 25 / 2016

Transaction ID : SA11C.11982

Amount of Each Receipt this Period

2500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 OF 109

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

VISTA OUTDOOR INC. EMPLOYEE CITIZENSHIP FUND

Mailing Address 4601 N. FAIRFAX DR.

SUITE 1200

City

ARLINGTON

State

VA

Zip Code

22203

FEC ID number of contributing
federal political committee.

C C00572156

Name of Employer

Occupation

Receipt For: 2016

☐ Primary

☐ General

☒ Other (specify)

Special-Primary

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2016

31

2016

Transaction ID : SA11C.12286

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WHAT A COUNTRY! PAC

Mailing Address 824 S MILLEDGE AVE STE 101

City

ATHENS

State

GA

Zip Code

30605

FEC ID number of contributing
federal political committee.

C C00571646

Name of Employer

Occupation

Receipt For: 2016

☐ Primary

☐ General

☒ Other (specify)

Special-Primary

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2016

31

2016

Transaction ID : SA11C.12447

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.
Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y Y Y

D D

Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

45775.42

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 62 OF 109

(check only one)

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	-------------------------------------	---	-----------------------------

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Landmark Theatres

Mailing Address 0850 West Pico Blvd

City

Los Angeles

State

CA

Zip Code

90064

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify)

General

Election Cycle-to-Date

1710.00

Date of Receipt

M M / D D / Y Y Y Y
01 / 19 / 2016

Transaction ID : SA14.11876

Amount of Each Receipt this Period

1710.00

☐ Memo Item
☐ Vendor Refund

Full Name (Last, First, Middle Initial)

B. NationBuilder

Mailing Address 520 S. Grand Ave.

2nd floor

City

Los Angeles

State

CA

Zip Code

90071

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify)

General

Election Cycle-to-Date

1444.00

Date of Receipt

M M / D D / Y Y Y Y
01 / 05 / 2016

Transaction ID : SA14.11875

Amount of Each Receipt this Period

722.00

☐ Memo Item
☐ Vendor Refund

Full Name (Last, First, Middle Initial)

C. NationBuilder

Mailing Address 520 S. Grand Ave.

2nd floor

City

Los Angeles

State

CA

Zip Code

90071

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify)

General

Election Cycle-to-Date

7444.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 19 / 2016

Transaction ID : SA14.11985

Amount of Each Receipt this Period

6000.00

☐ Memo Item
☐ Vendor Refund

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

8432.00

8432.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 63 OF 109

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Alamance for Freedom

Mailing Address PO Box 316

City	State	Zip Code
Mebane	NC	27302

Purpose of Disbursement
Donation

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
01 / 25 / 2016

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Transaction ID : SB17.11787

B. Anedot, Inc.

Mailing Address 214 Third Street, Suite 2B

City	State	Zip Code
Baton Rouge	LA	70801

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
03 / 24 / 2016

Amount of Each Disbursement this Period

228.77

☐ Memo Item

Transaction ID : SB17.12354

C. Anedot, Inc.

Mailing Address 214 Third Street, Suite 2B

City	State	Zip Code
Baton Rouge	LA	70801

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
03 / 28 / 2016

Amount of Each Disbursement this Period

12.00

☐ Memo Item

Transaction ID : SB17.12362

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

740.77

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 64 OF 109

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Anedot, Inc.

Mailing Address 214 Third Street, Suite 2B

City	State	Zip Code
Baton Rouge	LA	70801

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		28		2016

Amount of Each Disbursement this Period

78.30

☐ Memo Item

Transaction ID : SB17.12363

B. Anedot, Inc.

Mailing Address 214 Third Street, Suite 2B

City	State	Zip Code
Baton Rouge	LA	70801

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2016

Amount of Each Disbursement this Period

20.09

☐ Memo Item

Transaction ID : SB17.12368

c. Authorize.net

Mailing Address PO Box 8999

City	State	Zip Code
San Francisco	CA	94128-8999

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2016

Amount of Each Disbursement this Period

30.25

☐ Memo Item

Transaction ID : SB17.11730

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

128.64

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 65 OF 109

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address PO Box 8999

City	State	Zip Code
San Francisco	CA	94128-8999

Purpose of Disbursement
Mecharnt Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		02		2016

Amount of Each Disbursement this Period

29.00

☐ Memo Item

Transaction ID : SB17.11808

B. Authorize.net

Mailing Address PO Box 8999

City	State	Zip Code
San Francisco	CA	94128-8999

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2016

Amount of Each Disbursement this Period

32.35

☐ Memo Item

Transaction ID : SB17.12302

c. Axiom StrategiesMailing Address 1251 NW Briarcliff Pkwy
STE 85

City	State	Zip Code
Kansas City	MO	64116

Purpose of Disbursement
Onlines Services, Printing Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		10		2016

Amount of Each Disbursement this Period

9981.00

☐ Memo Item

Transaction ID : SB17.11823

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

10042.35

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Battleground Family

Mailing Address 836 W. Lexington Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		01		2016

City	State	Zip Code
High Point	NC	27262

Amount of Each Disbursement this Period

37.65

Purpose of Disbursement
Food/BeverageCategory/
Type☐ Memo Item

Transaction ID : SB17.11804

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. BB&T

Mailing Address 201 West Market Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		21		2016

City	State	Zip Code
Greensboro	NC	27401

Amount of Each Disbursement this Period

4.00

Purpose of Disbursement
Bank Service FeeCategory/
Type☐ Memo Item

Transaction ID : SB17.11775

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. BB&T

Mailing Address 201 West Market Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		22		2016

City	State	Zip Code
Greensboro	NC	27401

Amount of Each Disbursement this Period

4.00

Purpose of Disbursement
Bank Service FeeCategory/
Type☐ Memo Item

Transaction ID : SB17.11998

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

45.65

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. BB&T

Mailing Address 201 West Market Street

City	State	Zip Code
Greensboro	NC	27401

Purpose of Disbursement
Bank Service Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		21		2016

Amount of Each Disbursement this Period

4.00

☐ Memo Item

Transaction ID : SB17.12348

B. Shea Bryant

Full Name (Last, First, Middle Initial)

Mailing Address 2941 Battleground Avenue
#38334

City	State	Zip Code
Greensboro	NC	27438

Purpose of Disbursement
Printing Services, Postage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		19		2016

Amount of Each Disbursement this Period

590.58

☐ Memo Item

Transaction ID : SB17.11773

c. One Source Document Solutions

Full Name (Last, First, Middle Initial)

Mailing Address 311-D Pomona Dr

City	State	Zip Code
Greensboro	NC	27407

Purpose of Disbursement
Printing Services, Postage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		19		2016

Amount of Each Disbursement this Period

590.58

☒ Memo Item

Transaction ID : SB17.11773.0

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

594.58

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 68 OF 109

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Capitol Hill Club

Mailing Address 300 First St SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Food/Beverage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		16		2016

Amount of Each Disbursement this Period

733.53

☐ Memo Item

Transaction ID : SB17.11759

B. Capitol Hill Club

Mailing Address 300 First St SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Food/Beverage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		19		2016

Amount of Each Disbursement this Period

230.39

☐ Memo Item

Transaction ID : SB17.11758

c. Capitol Hill Club

Mailing Address 300 First St SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Food/Beverage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		18		2016

Amount of Each Disbursement this Period

141.76

☐ Memo Item

Transaction ID : SB17.11917

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1105.68

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Capitol Hill Club

Mailing Address 300 First St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Food/Beverage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 18 / 2016

Amount of Each Disbursement this Period

305.35

☐ Memo Item

Transaction ID : SB17.11918

B. Capitol Hill Club

Mailing Address 300 First St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Food/Beverage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 17 / 2016

Amount of Each Disbursement this Period

371.54

☐ Memo Item

Transaction ID : SB17.12340

c. Capitol Hill Club

Mailing Address 300 First St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Food/Beverage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 17 / 2016

Amount of Each Disbursement this Period

276.61

☐ Memo Item

Transaction ID : SB17.12341

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

953.50

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Citi Cards

Mailing Address PO Box 9001037

City	State	Zip Code
Louisville	KY	40290

Purpose of Disbursement
Event Site fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		15		2016

Amount of Each Disbursement this Period

3220.00

☐ Memo Item

Transaction ID : SB17.11892

B. Landmark Theatres

Mailing Address 0850 West Pico Blvd

City	State	Zip Code
Los Angeles	CA	90064

Purpose of Disbursement
Theater Rental

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		15		2016

Amount of Each Disbursement this Period

1710.00

☒ Memo Item

Transaction ID : SB17.11892.0

c. Congressional InstituteMailing Address 900 2nd Street NE
Suite 303

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement
Conference fee

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		15		2016

Amount of Each Disbursement this Period

1510.00

☒ Memo Item

Transaction ID : SB17.11892.1

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

3220.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 71 OF 109

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. CM&Co, LLC

Mailing Address PO Box 97275

City	State	Zip Code
Raleigh	NC	27624

Purpose of Disbursement
Accounting Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2016

Amount of Each Disbursement this Period

3021.75

☐ Memo Item

Transaction ID : SB17.11749

B. CM&Co, LLC

Mailing Address PO Box 97275

City	State	Zip Code
Raleigh	NC	27624

Purpose of Disbursement
Accounting Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		10		2016

Amount of Each Disbursement this Period

2415.12

☐ Memo Item

Transaction ID : SB17.11824

c. CM&Co, LLC

Mailing Address PO Box 97275

City	State	Zip Code
Raleigh	NC	27624

Purpose of Disbursement
Accounting Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		16		2016

Amount of Each Disbursement this Period

1388.90

☐ Memo Item

Transaction ID : SB17.12333

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

6825.77

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. CostCo

Mailing Address 4201 West Wendover

City	State	Zip Code
Greensboro	NC	27402

Purpose of Disbursement
Food/Beverage

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
02 / 16 / 2016

Amount of Each Disbursement this Period

55.00

☐ Memo Item

Transaction ID : SB17.11908

B. CostCo

Mailing Address 4201 West Wendover

City	State	Zip Code
Greensboro	NC	27402

Purpose of Disbursement
Food/Beverage

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
02 / 16 / 2016

Amount of Each Disbursement this Period

211.92

☐ Memo Item

Transaction ID : SB17.11909

c. Craft Insurance

Mailing Address PO Box 14946

City	State	Zip Code
Greensboro	NC	27415

Purpose of Disbursement
Insurance

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
01 / 27 / 2016

Amount of Each Disbursement this Period

302.00

☐ Memo Item

Transaction ID : SB17.11794

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

568.92

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. William Neal Davis

Mailing Address 505 W Cornwallis Dr

City	State	Zip Code
Greensboro	NC	27408

Purpose of Disbursement
Event Tickets

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		15		2016

Amount of Each Disbursement this Period

220.00

☐ Memo Item

Transaction ID : SB17.11896

B. Juvenile Diabetes Research FoundationMailing Address 216 West Market Street
Suite B

City	State	Zip Code
Greensboro	NC	27401

Purpose of Disbursement
Donation

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		15		2016

Amount of Each Disbursement this Period

220.00

☒ Memo Item

Transaction ID : SB17.11896.0

C. DHARMA MERCHANT SERVICES

Mailing Address P.O. BOX 246

City	State	Zip Code
ALPHARETTA	GA	30009

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		04		2016

Amount of Each Disbursement this Period

43.01

☐ Memo Item

Transaction ID : SB17.11721

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

263.01

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 74 OF 109

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. DHARMA MERCHANT SERVICES

Mailing Address P.O. BOX 246

City	State	Zip Code
ALPHARETTA	GA	30009

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		02		2016

Amount of Each Disbursement this Period

37.57

☐ Memo Item

Transaction ID : SB17.12010

B. DHARMA MERCHANT SERVICES

Mailing Address P.O. BOX 246

City	State	Zip Code
ALPHARETTA	GA	30009

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2016

Amount of Each Disbursement this Period

178.39

☐ Memo Item

Transaction ID : SB17.12301

c. Facebook

Mailing Address 1601 S California Ave

City	State	Zip Code
Palo Alto	CA	94304

Purpose of Disbursement
Advertising

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		04		2016

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Transaction ID : SB17.11715

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

230.96

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Facebook

Mailing Address 1601 S California Ave

City	State	Zip Code
Palo Alto	CA	94304

Purpose of Disbursement
Advertising

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		01		2016

Amount of Each Disbursement this Period

158.59

☐ Memo Item

Transaction ID : SB17.11805

B. Facebook

Full Name (Last, First, Middle Initial)

Mailing Address 1601 S California Ave

City	State	Zip Code
Palo Alto	CA	94304

Purpose of Disbursement
Advertising

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		01		2016

Amount of Each Disbursement this Period

33.00

☐ Memo Item

Transaction ID : SB17.11806

C. Facebook

Full Name (Last, First, Middle Initial)

Mailing Address 1601 S California Ave

City	State	Zip Code
Palo Alto	CA	94304

Purpose of Disbursement
Advertising

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2016

Amount of Each Disbursement this Period

86.67

☐ Memo Item

Transaction ID : SB17.12297

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

278.26

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Facebook

Mailing Address 1601 S California Ave

City	State	Zip Code
Palo Alto	CA	94304

Purpose of Disbursement
Advertising

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
03 / 01 / 2016

Amount of Each Disbursement this Period

30.08

☐ Memo Item

Transaction ID : SB17.12298

B. Field & Stream

Mailing Address 1305 Bridford Parkway

City	State	Zip Code
Greensboro	NC	27407

Purpose of Disbursement
Event Host Gifts

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
02 / 16 / 2016

Amount of Each Disbursement this Period

248.74

☐ Memo Item

Transaction ID : SB17.11903

c. Film Firearms, Inc.

Mailing Address PO Box 339

City	State	Zip Code
Stoneville	NC	27048

Purpose of Disbursement
Advertising

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
01 / 26 / 2016

Amount of Each Disbursement this Period

228.45

☐ Memo Item

Transaction ID : SB17.11790

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

507.27

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. G-Partnership, LLC

Mailing Address PO Box 4425

City	State	Zip Code
Greensboro	NC	27404

Purpose of Disbursement
Rent

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		04		2016

Amount of Each Disbursement this Period

1118.00

☐ Memo Item

Transaction ID : SB17.11725

B. G-Partnership, LLC

Mailing Address PO Box 4425

City	State	Zip Code
Greensboro	NC	27404

Purpose of Disbursement
Rent

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		26		2016

Amount of Each Disbursement this Period

1118.00

☐ Memo Item

Transaction ID : SB17.11792

c. G-Partnership, LLC

Mailing Address PO Box 4425

City	State	Zip Code
Greensboro	NC	27404

Purpose of Disbursement
Rent

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		15		2016

Amount of Each Disbursement this Period

1118.00

☐ Memo Item

Transaction ID : SB17.11899

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3354.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. G-Partnership, LLC

Mailing Address PO Box 4425

City	State	Zip Code
Greensboro	NC	27404

Purpose of Disbursement
Rent

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		16		2016

Amount of Each Disbursement this Period

1118.00

☐ Memo Item

Transaction ID : SB17.12334

B. Google

Mailing Address 1600 Amphitheatre Pkwy

City	State	Zip Code
Mountain View	CA	94043

Purpose of Disbursement
Online Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		04		2016

Amount of Each Disbursement this Period

79.66

☐ Memo Item

Transaction ID : SB17.11720

c. Google

Mailing Address 1600 Amphitheatre Pkwy

City	State	Zip Code
Mountain View	CA	94043

Purpose of Disbursement
Online Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2016

Amount of Each Disbursement this Period

80.00

☐ Memo Item

Transaction ID : SB17.11809

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1277.66

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Google

Mailing Address 1600 Amphitheatre Pkwy

City	State	Zip Code
Mountain View	CA	94043

Purpose of Disbursement
Online Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		04		2016

Amount of Each Disbursement this Period

71.36

☐ Memo Item

Transaction ID : SB17.12307

B. Harbor East Theater

Mailing Address 645 S. President Street

City	State	Zip Code
Baltimore	MD	21202

Purpose of Disbursement
Food/Beverage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		19		2016

Amount of Each Disbursement this Period

287.00

☐ Memo Item

Transaction ID : SB17.11756

c. Harris Teeter

Mailing Address 3357 Battleground Ave

City	State	Zip Code
Greensboro	NC	27410

Purpose of Disbursement
Food/Beverage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		19		2016

Amount of Each Disbursement this Period

8.90

☐ Memo Item

Transaction ID : SB17.11989

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

367.26

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Hursey's Bar-B-Q

Mailing Address 1834 S Church St

City	State	Zip Code
Burlington	NC	27215

Purpose of Disbursement
Food/Beverage

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 10 / 2016

Amount of Each Disbursement this Period

40.00

☐ Memo Item

Transaction ID : SB17.12315

B. Jon Eric Johnson PhotographyMailing Address 634 Oak Leak Road
Apt E

City	State	Zip Code
Asheboro	NC	27205

Purpose of Disbursement
Photography Services

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 09 / 2016

Amount of Each Disbursement this Period

225.00

☐ Memo Item

Transaction ID : SB17.11737

C. Landmark Theatres

Mailing Address 0850 West Pico Blvd

City	State	Zip Code
Los Angeles	CA	90064

Purpose of Disbursement
Event Site Fee

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 19 / 2016

Amount of Each Disbursement this Period

1710.00

☐ Memo Item

Transaction ID : SB17.11752

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1975.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Michael's

Mailing Address 1616 Highwoods Blvd

City	State	Zip Code
Greensboro	NC	27410

Purpose of Disbursement
Office/Event Supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		18		2016

Amount of Each Disbursement this Period

244.22

☐ Memo Item

Transaction ID : SB17.11915

B. National Rifle Association of America

Mailing Address 11250 Waples Mill Rd

City	State	Zip Code
Fairfax	VA	22030

Purpose of Disbursement
Event Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		16		2016

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Transaction ID : SB17.12329

c. NationBuilderMailing Address 520 S. Grand Ave.
2nd floor

City	State	Zip Code
Los Angeles	CA	90071

Purpose of Disbursement
Software

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2016

Amount of Each Disbursement this Period

722.00

☐ Memo Item

Transaction ID : SB17.11727

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1066.22

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. NationBuilderMailing Address 520 S. Grand Ave.
2nd floor

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement
Software

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		02		2016

Amount of Each Disbursement this Period

809.40

☐ Memo Item

Transaction ID : SB17.11807

B. NationBuilderMailing Address 520 S. Grand Ave.
2nd floor

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement
Software

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2016

Amount of Each Disbursement this Period

6000.00

☐ Memo Item

Transaction ID : SB17.11815

C. NC State Board of Elections

Mailing Address PO Box 27255

City Raleigh State NC Zip Code 27611-7255

Purpose of Disbursement
Filing Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		23		2016

Amount of Each Disbursement this Period

1740.00

☐ Memo Item

Transaction ID : SB17.12351

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

8549.40

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. North Carolina Right to Life

Mailing Address PO Box 9282

City	State	Zip Code
Greensboro	NC	27429-0282

Purpose of Disbursement
Event Sponsorship

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 12 / 2016

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Transaction ID : SB17.11747

B. NorthStar Campaign Systems, Inc.

Mailing Address 11421 Davenport Street

City	State	Zip Code
Omaha	NE	68154

Purpose of Disbursement
Phone Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 07 / 2016

Amount of Each Disbursement this Period

2177.00

☐ Memo Item

Transaction ID : SB17.11722

c. NorthStar Campaign Systems, Inc.

Mailing Address 11421 Davenport Street

City	State	Zip Code
Omaha	NE	68154

Purpose of Disbursement
Internet/Phone Service

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 22 / 2016

Amount of Each Disbursement this Period

1079.32

☐ Memo Item

Transaction ID : SB17.11999

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3506.32

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. NorthStar Campaign Systems, Inc.

Mailing Address 11421 Davenport Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		16		2016

City	State	Zip Code
Omaha	NE	68154

Amount of Each Disbursement this Period

1359.49

Purpose of Disbursement
Phone ServicesCategory/
Type☐ Memo Item

Transaction ID : SB17.12335

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Office Depot

Mailing Address 3018 High Point Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		11		2016

City	State	Zip Code
Greensboro	NC	27403

Amount of Each Disbursement this Period

49.05

Purpose of Disbursement
Office SuppliesCategory/
Type☐ Memo Item

Transaction ID : SB17.11739

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

c. Office Depot

Mailing Address 3018 High Point Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		19		2016

City	State	Zip Code
Greensboro	NC	27403

Amount of Each Disbursement this Period

65.10

Purpose of Disbursement
Office SuppliesCategory/
Type☐ Memo Item

Transaction ID : SB17.11768

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1473.64

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Office Depot

Mailing Address 3018 High Point Rd

City	State	Zip Code
Greensboro	NC	27403

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		28		2016

Amount of Each Disbursement this Period

98.20

☐ Memo Item

Transaction ID : SB17.11795

B. Office Depot

Mailing Address 3018 High Point Rd

City	State	Zip Code
Greensboro	NC	27403

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		08		2016

Amount of Each Disbursement this Period

124.24

☐ Memo Item

Transaction ID : SB17.11816

c. Office Depot

Mailing Address 3018 High Point Rd

City	State	Zip Code
Greensboro	NC	27403

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		09		2016

Amount of Each Disbursement this Period

128.03

☐ Memo Item

Transaction ID : SB17.11818

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

350.07

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Office Depot

Mailing Address 3018 High Point Rd

City	State	Zip Code
Greensboro	NC	27403

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		10		2016

Amount of Each Disbursement this Period

109.00

☐ Memo Item

Transaction ID : SB17.11821

B. Office Depot

Mailing Address 3018 High Point Rd

City	State	Zip Code
Greensboro	NC	27403

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		10		2016

Amount of Each Disbursement this Period

49.00

☐ Memo Item

Transaction ID : SB17.11822

c. Office Depot

Mailing Address 3018 High Point Rd

City	State	Zip Code
Greensboro	NC	27403

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		19		2016

Amount of Each Disbursement this Period

14.92

☐ Memo Item

Transaction ID : SB17.11988

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

172.92

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Office Depot

Mailing Address 3018 High Point Rd

City	State	Zip Code
Greensboro	NC	27403

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		22		2016

Amount of Each Disbursement this Period

108.33

☐ Memo Item

Transaction ID : SB17.11994

B. Office Depot

Mailing Address 3018 High Point Rd

City	State	Zip Code
Greensboro	NC	27403

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		29		2016

Amount of Each Disbursement this Period

111.40

☐ Memo Item

Transaction ID : SB17.12004

c. Office Depot

Mailing Address 3018 High Point Rd

City	State	Zip Code
Greensboro	NC	27403

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		29		2016

Amount of Each Disbursement this Period

74.62

☐ Memo Item

Transaction ID : SB17.12006

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

294.35

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Office Depot

Mailing Address 3018 High Point Rd

City	State	Zip Code
Greensboro	NC	27403

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2016

Amount of Each Disbursement this Period

187.86

☐ Memo Item

Transaction ID : SB17.12317

B. Office Depot

Mailing Address 3018 High Point Rd

City	State	Zip Code
Greensboro	NC	27403

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		11		2016

Amount of Each Disbursement this Period

131.07

☐ Memo Item

Transaction ID : SB17.12321

c. Office Depot

Mailing Address 3018 High Point Rd

City	State	Zip Code
Greensboro	NC	27403

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		21		2016

Amount of Each Disbursement this Period

98.71

☐ Memo Item

Transaction ID : SB17.12347

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

417.64

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Office Depot

Mailing Address 3018 High Point Rd

City	State	Zip Code
Greensboro	NC	27403

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		23		2016

Amount of Each Disbursement this Period

42.65

☐ Memo Item

Transaction ID : SB17.12349

B. Office Depot

Mailing Address 3018 High Point Rd

City	State	Zip Code
Greensboro	NC	27403

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		24		2016

Amount of Each Disbursement this Period

74.70

☐ Memo Item

Transaction ID : SB17.12352

c. Office Depot

Mailing Address 3018 High Point Rd

City	State	Zip Code
Greensboro	NC	27403

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		24		2016

Amount of Each Disbursement this Period

9.58

☐ Memo Item

Transaction ID : SB17.12353

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

126.93

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. One Source Document Solutions

Mailing Address 311-D Pomona Dr

City	State	Zip Code
Greensbro	NC	27407

Purpose of Disbursement
Printing Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		09		2016

Amount of Each Disbursement this Period

150.84

☐ Memo Item

Transaction ID : SB17.11738

B. One Source Document Solutions

Mailing Address 311-D Pomona Dr

City	State	Zip Code
Greensbro	NC	27407

Purpose of Disbursement
Printing Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		16		2016

Amount of Each Disbursement this Period

4087.60

☐ Memo Item

Transaction ID : SB17.12336

c. Rebel Strategies, LLC

Mailing Address 228 Chesnut Level Lane

City	State	Zip Code
Blairs	VA	24527

Purpose of Disbursement
Managment Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		19		2016

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Transaction ID : SB17.11771

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

7238.44

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Rebel Strategies, LLC

Mailing Address 228 Chesnut Level Lane

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		22		2016

City	State	Zip Code
Blairs	VA	24527

Amount of Each Disbursement this Period

4998.10

Purpose of Disbursement
Managment ConsultingCategory/
Type☐ Memo Item

Transaction ID : SB17.12000

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. Red Stampede

Mailing Address 6701 Fairview Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		04		2016

City	State	Zip Code
Charlotte	NC	28210

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement
Merchant FeesCategory/
Type☐ Memo Item

Transaction ID : SB17.11717

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. Remington Research Group

Mailing Address 1420 NW Vivion Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		10		2016

City	State	Zip Code
Kansas City	MO	64118

Amount of Each Disbursement this Period

2700.00

Purpose of Disbursement
PollingCategory/
Type☐ Memo Item

Transaction ID : SB17.11825

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

7948.10

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Reto's Kitchen

Mailing Address 600 S. Elam Street

City	State	Zip Code
Greensboro	NC	27403

Purpose of Disbursement
Food/Beverage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		16		2016

Amount of Each Disbursement this Period

525.21

☐ Memo Item

Transaction ID : SB17.12337

B. Katie Sessoms

Mailing Address 6507 Horseman Trl

City	State	Zip Code
Summerfield	NC	27358

Purpose of Disbursement
Managment Consulting

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		04		2016

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Transaction ID : SB17.11814

c. Katie Sessoms

Mailing Address 6507 Horseman Trl

City	State	Zip Code
Summerfield	NC	27358

Purpose of Disbursement
Managment Consulting

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2016

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Transaction ID : SB17.12304

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5525.21

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 93 OF 109

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Sheetz

Mailing Address 5700 6th Ave

City	State	Zip Code
Altoona	PA	16602

Purpose of Disbursement
Fuel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		19		2016

Amount of Each Disbursement this Period

32.10

☐ Memo Item

Transaction ID : SB17.11770

B. Sheetz

Mailing Address 5700 6th Ave

City	State	Zip Code
Altoona	PA	16602

Purpose of Disbursement
Fuel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		21		2016

Amount of Each Disbursement this Period

18.85

☐ Memo Item

Transaction ID : SB17.11774

c. Sheetz

Mailing Address 5700 6th Ave

City	State	Zip Code
Altoona	PA	16602

Purpose of Disbursement
Fuel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		26		2016

Amount of Each Disbursement this Period

19.75

☐ Memo Item

Transaction ID : SB17.11789

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

70.70

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Sheetz

Mailing Address 5700 6th Ave

City	State	Zip Code
Altoona	PA	16602

Purpose of Disbursement
Fuel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		16		2016

Amount of Each Disbursement this Period

16.65

☐ Memo Item

Transaction ID : SB17.11905

B. Sheetz

Mailing Address 5700 6th Ave

City	State	Zip Code
Altoona	PA	16602

Purpose of Disbursement
Fuel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		18		2016

Amount of Each Disbursement this Period

24.00

☐ Memo Item

Transaction ID : SB17.11914

c. Sheetz

Mailing Address 5700 6th Ave

City	State	Zip Code
Altoona	PA	16602

Purpose of Disbursement
Fuel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		18		2016

Amount of Each Disbursement this Period

23.50

☐ Memo Item

Transaction ID : SB17.11919

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

64.15

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Shell Oil

Mailing Address P.O. Box 2463

City	State	Zip Code
Houston	TX	77252

Purpose of Disbursement
Fuel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		04		2016

Amount of Each Disbursement this Period

30.00

☐ Memo Item

Transaction ID : SB17.11718

B. Shell Oil

Mailing Address P.O. Box 2463

City	State	Zip Code
Houston	TX	77252

Purpose of Disbursement
Fuel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		11		2016

Amount of Each Disbursement this Period

12.85

☐ Memo Item

Transaction ID : SB17.11741

c. Shell Oil

Mailing Address P.O. Box 2463

City	State	Zip Code
Houston	TX	77252

Purpose of Disbursement
Fuel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		19		2016

Amount of Each Disbursement this Period

12.75

☐ Memo Item

Transaction ID : SB17.11765

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

55.60

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Shell Oil

Mailing Address P.O. Box 2463

City	State	Zip Code
Houston	TX	77252

Purpose of Disbursement
Fuel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2016

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Transaction ID : SB17.12296

B. Shell Oil

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 2463

City	State	Zip Code
Houston	TX	77252

Purpose of Disbursement
Fuel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		16		2016

Amount of Each Disbursement this Period

33.25

☐ Memo Item

Transaction ID : SB17.12327

c. Shell Oil

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 2463

City	State	Zip Code
Houston	TX	77252

Purpose of Disbursement
Fuel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		28		2016

Amount of Each Disbursement this Period

24.40

☐ Memo Item

Transaction ID : SB17.12357

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

92.65

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Sirius XM

Mailing Address 1221 Avenue of the Americas

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		04		2016

City	State	Zip Code
New York City	NY	10020

Amount of Each Disbursement this Period

24.32

Purpose of Disbursement
Car ServicesCategory/
Type☐ Memo Item

Transaction ID : SB17.11719

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Sirius XM

Mailing Address 1221 Avenue of the Americas

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2016

City	State	Zip Code
New York City	NY	10020

Amount of Each Disbursement this Period

24.32

Purpose of Disbursement
Car ServicesCategory/
Type☐ Memo Item

Transaction ID : SB17.11810

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. Sirius XM

Mailing Address 1221 Avenue of the Americas

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2016

City	State	Zip Code
New York City	NY	10020

Amount of Each Disbursement this Period

24.32

Purpose of Disbursement
Car ServicesCategory/
Type☐ Memo Item

Transaction ID : SB17.12306

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

72.96

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Starmount Forest Country Club

Mailing Address 1 Sam Sneed Drive

City	State	Zip Code
Greensboro	NC	27410

Purpose of Disbursement
Food/Beverage, Site Fee

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 16 / 2016

Amount of Each Disbursement this Period

2893.42

☐ Memo Item

Transaction ID : SB17.12338

B. Target

Full Name (Last, First, Middle Initial)

Mailing Address 1212 Bridford Pkwy

City	State	Zip Code
Greensboro	NC	27407

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 12 / 2016

Amount of Each Disbursement this Period

138.69

☐ Memo Item

Transaction ID : SB17.11748

c. Target

Full Name (Last, First, Middle Initial)

Mailing Address 1212 Bridford Pkwy

City	State	Zip Code
Greensboro	NC	27407

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 19 / 2016

Amount of Each Disbursement this Period

145.61

☐ Memo Item

Transaction ID : SB17.11767

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3177.72

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Target

Mailing Address 1212 Bridford Pkwy

City	State	Zip Code
Greensboro	NC	27407

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	---

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
-------------------	---

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 16 / 2016

Amount of Each Disbursement this Period

4191.18

☐ Memo Item

Transaction ID : SB17.11910

B. Target

Full Name (Last, First, Middle Initial)

Mailing Address 1212 Bridford Pkwy

City	State	Zip Code
Greensboro	NC	27407

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	---

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
-------------------	---

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 16 / 2016

Amount of Each Disbursement this Period

65.07

☐ Memo Item

Transaction ID : SB17.12332

c. The Cannon Group, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1001 Pennsylvania Avenue NW
Suite 1300 N

City	State	Zip Code
Washington	DC	20004

Purpose of Disbursement
Fundraising Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	---

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
-------------------	---

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 07 / 2016

Amount of Each Disbursement this Period

4107.44

☐ Memo Item

Transaction ID : SB17.11731

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4191.69

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. The Cannon Group, LLCMailing Address 1001 Pennsylvania Avenue NW
Suite 1300 N

City Washington State DC Zip Code 20004

Purpose of Disbursement
Fundraising Consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		22		2016

Amount of Each Disbursement this Period

3500.00

☐ Memo Item

Transaction ID : SB17.12001

Full Name (Last, First, Middle Initial)

B. The Cannon Group, LLCMailing Address 1001 Pennsylvania Avenue NW
Suite 1300 N

City Washington State DC Zip Code 20004

Purpose of Disbursement
Fundraising Consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2016

Amount of Each Disbursement this Period

3500.00

☐ Memo Item

Transaction ID : SB17.12305

Full Name (Last, First, Middle Initial)

c. The Cannon Group, LLCMailing Address 1001 Pennsylvania Avenue NW
Suite 1300 N

City Washington State DC Zip Code 20004

Purpose of Disbursement
Fundraising Consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		16		2016

Amount of Each Disbursement this Period

608.68

☐ Memo Item

Transaction ID : SB17.12339

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

7608.68

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. The UPS Store

Mailing Address 4642 W Market St

City	State	Zip Code
Greensboro	NC	27407

Purpose of Disbursement
Shipping

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		21		2016

Amount of Each Disbursement this Period

627.61

☐ Memo Item

Transaction ID : SB17.12346

B. Time Warner Cable

Mailing Address 200 Centreport Dr

City	State	Zip Code
Greensboro	NC	27409

Purpose of Disbursement
Phone/Internet Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		10		2016

Amount of Each Disbursement this Period

550.28

☐ Memo Item

Transaction ID : SB17.11826

c. Tripps Restaurant

Mailing Address 1337 Winstead Pl

City	State	Zip Code
Greensboro	NC	27408

Purpose of Disbursement
Food/Beverage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		22		2016

Amount of Each Disbursement this Period

65.00

☐ Memo Item

Transaction ID : SB17.11780

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

627.61

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Tripps Restaurant

Mailing Address 1337 Winstead Pl

City	State	Zip Code
Greensboro	NC	27408

Purpose of Disbursement
Food/Beverage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		23		2016

Amount of Each Disbursement this Period

52.00

☐ Memo Item

Transaction ID : SB17.12003

B. United Airlines

Mailing Address 6415 Bryan Blvd #A

City	State	Zip Code
Greensboro	NC	27409

Purpose of Disbursement
Airfare

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		28		2016

Amount of Each Disbursement this Period

293.20

☐ Memo Item

Transaction ID : SB17.12358

c. United Airlines

Mailing Address 6415 Bryan Blvd #A

City	State	Zip Code
Greensboro	NC	27409

Purpose of Disbursement
Airfare

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		28		2016

Amount of Each Disbursement this Period

313.20

☐ Memo Item

Transaction ID : SB17.12359

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

658.40

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 2941 Battleground Ave

City	State	Zip Code
Greensboro	NC	27408

Purpose of Disbursement
Post Office Box Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		15		2016

Amount of Each Disbursement this Period

102.00

☐ Memo Item

Transaction ID : SB17.11900

B. Van's Advertising

Mailing Address 3290 Van Dr

City	State	Zip Code
Burlington	NC	27215

Purpose of Disbursement
Advertising Signage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		22		2016

Amount of Each Disbursement this Period

7152.68

☐ Memo Item

Transaction ID : SB17.12002

C. Verizon Wireless

Mailing Address PO Box 660108

City	State	Zip Code
Dallas	TX	75266

Purpose of Disbursement
Phone Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		11		2016

Amount of Each Disbursement this Period

86.30

☐ Memo Item

Transaction ID : SB17.11745

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

7340.98

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address PO Box 660108

City	State	Zip Code
Dallas	TX	75266

Purpose of Disbursement
Phone Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		11		2016

Amount of Each Disbursement this Period

207.00

☐ Memo Item

Transaction ID : SB17.11746

B. Verizon Wireless

Mailing Address PO Box 660108

City	State	Zip Code
Dallas	TX	75266

Purpose of Disbursement
Phone Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		11		2016

Amount of Each Disbursement this Period

256.56

☐ Memo Item

Transaction ID : SB17.11835

C. Verizon Wireless

Mailing Address PO Box 660108

City	State	Zip Code
Dallas	TX	75266

Purpose of Disbursement
Phone Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2016

Amount of Each Disbursement this Period

254.81

☐ Memo Item

Transaction ID : SB17.12316

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

718.37

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Village Tavern

Mailing Address 1903 Westridge Rd

City	State	Zip Code
Greensboro	NC	27408

Purpose of Disbursement
Food/Beverage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		04		2016

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Transaction ID : SB17.11714

B. Village Tavern

Mailing Address 1903 Westridge Rd

City	State	Zip Code
Greensboro	NC	27408

Purpose of Disbursement
Food/Beverage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		27		2016

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Transaction ID : SB17.11793

c. Village Tavern

Mailing Address 1903 Westridge Rd

City	State	Zip Code
Greensboro	NC	27408

Purpose of Disbursement
Food/Beverage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		29		2016

Amount of Each Disbursement this Period

67.00

☐ Memo Item

Transaction ID : SB17.11798

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

267.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 106 OF 109

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Walmart

Mailing Address 4424 W Wendover Ave

City	State	Zip Code
Greensboro	NC	27407

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		08		2016

Amount of Each Disbursement this Period

200.03

☐ Memo Item

Transaction ID : SB17.11732

B. Walmart

Full Name (Last, First, Middle Initial)

Mailing Address 4424 W Wendover Ave

City	State	Zip Code
Greensboro	NC	27407

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		15		2016

Amount of Each Disbursement this Period

36.17

☐ Memo Item

Transaction ID : SB17.11760

c. Walmart

Full Name (Last, First, Middle Initial)

Mailing Address 4424 W Wendover Ave

City	State	Zip Code
Greensboro	NC	27407

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		19		2016

Amount of Each Disbursement this Period

23.49

☐ Memo Item

Transaction ID : SB17.11763

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

259.69

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. World Relief Human Trafficking FundMailing Address 155 Northpoint Avenue
Suite 102

City High Point State NC Zip Code 27262

Purpose of Disbursement
Donation

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		25		2016

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Transaction ID : SB17.11785

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

Amount of Each Disbursement this Period

--

☐ Memo Item**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

Amount of Each Disbursement this Period

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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

500.00

94855.12

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input checked="" type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. GARY PALMER FOR CONGRESS

Mailing Address 1919 OXMOOR RD #235

City	State	Zip Code
HOMEWOOD	AL	35209

Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: AL District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		22		2016

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Transaction ID : SB20C.12389

B.

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
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Amount of Each Disbursement this Period

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☐ Memo Item**C.**

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
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Amount of Each Disbursement this Period

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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

500.00

500.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. GREATER GREENSBORO REPUBLICAN WOMENS CLUB

Mailing Address 231-A SOUTH ELM STREET

City	State	Zip Code
GREENSBORO	NC	27401

Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		16		2016

Amount of Each Disbursement this Period

36.25

☐ Memo Item

Transaction ID : SB21.12384

B.

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
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Amount of Each Disbursement this Period

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☐ Memo Item**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
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Amount of Each Disbursement this Period

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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

36.25

36.25
